Attorney Docket No.: 13178-005900US

DECLARATION

As a below named inventor, I declare that:

My residence,												
inventor (if onl	y one name	is listed b	elow) or a	an origina	ıl, first an	d joint :	inventor (if	plural inve	entors are na	ımed belov	w) of the s	subject
matter which	is claimed	and for	which a	patent	is sought	on th	e inventio	n entitled:	SYSTEM	AND M	ŒTHOD	FOR
ESTABLISHI	NG VASC	ULAR AC	CESS the	specifica	ation of w	hich wa	s filed on l	May 19, 19	99 as Appli	cation No.	. 09/314,8	78 and
was amended o	on	((if applical	ble).								

I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, Section 1.56. I claim foreign priority benefits under Title 35, United States Code, Section 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s):

Country	Application No.	Date of Filing	Priority Claimed Under 35 USC 11

Thereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below:

Application No.	Filing Date			

Lclaim the benefit under Title 35, United States Code, Section 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, Section 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, Section 1.56 which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application No.	Date of Filing	Status
·		

Full Name of Inventor 1:	Last Name: CARLSON	First Name: JOHN	Middle Name or Initial: E.			
Residence & City: Citizenship: San Jose		State/Foreign Country: California	1	Country of Citizenship: United States		
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Full Name of Last Name: Inventor 2: TSUJI		First Name: CRAIG	Middle Name or I	nitial:		
Residence & City: Citizenship: Santa Clara		State/Foreign Country: California	Country of Citizer United States			
Post Office Post Office Address: 1400 Bowe Avenue, #803		City: Santa Clara	State/Country: Postal Code: 95051			

Full Name of Last Name: nventor 3: HARRIS		First Name: SCOTT	Middle Name or Initial:		
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Full Name of Last Name: Inventor 4: ORTH		First Name: MICHAEL	Middle Name or Initial: J.		
Residence & City: Citizenship: Morgan Hill		State/Foreign Country: California	Country of Citizer United States		
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I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

	Signature of Inventor 1 JOHN E. CARLSON	Signature o	(5		Signature of Inventor 3 SCOTT L. HARRIS	
Ō	Date 7/8/99	Date 7	8	99	Date 7/8/99	
	Signature of Inventor 4		T		7 / 1	
	MULLI CITAL MICHAEL J. ORTH					

PA 3007339 v1

Date